

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	PREFABRICATED MEMBRANE BASED ON MODIFIED POLYURETHANE BITUMINOUS BINDER AND PROCESS FOR PRODUCTION
Attorney Docket Number::	0514-1121
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent	No
Appl.?::	

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: PIERRE ETIENNE
Middle Name::
Family Name:: BINDSCHEDLER
City of Residence:: OBERNAI
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 3 HAUTE CORNICHE

City of Mailing Address:: OBERNAI
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 67210

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: REMI
Middle Name::
Family Name:: PERRIN
City of Residence:: BISCHOFFSHEIM
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 50 RUE DES VERGERS

City of Mailing Address:: BISCHOFFSHEIM
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 67870

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: CORINNE
Middle Name::
Family Name:: SCHALL
City of Residence:: STRASBOURG
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 4 RUE GOUNOD

City of Mailing Address:: STRASBOURG
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 67000

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: ARNAUD
Middle Name::
Family Name:: NOURI
City of Residence:: KOGENHEIM
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 233 RUE DES PRIMEVERES

City of Mailing Address:: KOGENHEIM
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 67230

Correspondence Information

Correspondence Customer 000466

Number::

Representative Information

Representative Customer	000466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	0211258	9/11/02	Yes

Assignment Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::